MULTIPLE DEPENDENT CLAIM SERIAL NO. JEHNS DOWN															
FEE CALCULATION SHEET								10/527506				FILING DATE			
(FOR USE WITH FORM PTO-875)									APPLICANT(S)						
	ASI	ZII ED	AF	TER	· AF	TER	CLAIN	15							
	AS FILED		1"AMENDMENT		1 AMENDMENT				AS FILED		AFTER		AFTER		
1	IND.	DEP.	IND.	DEP.	IND.	DEP.	]		IND.	DEP.	IND.	DEP.	IND.	DEP.	
2		1				<del> </del>	1	<u>51</u>					4(D.	DEP.	
3		-					1	53	<del> </del>	<del> </del>	<b> </b> -				
5		1					]	54		<del> </del>					
6		7 2				<del> </del>	-	55				-			
7		<b>&gt;</b>	2			<del> </del>	1	56 57	<del> </del>						
9		1		2			3	58	<del> </del>		——				
10		1	$\leq$	-			1	59		-					
11		57				<del> </del>	1	60							
12	$= T_{-}$			>				61 62	<u> </u>						
13							1	63							
14 15		- <i> - </i> -						64 -							
16		7-4-		2		·		65							
17		1						66							
18		1,						67 68							
19 20		-, -/:					1	69							
21		1-1						70					}		
22		7						71							
23				=				72 73							
24								74							
25 26				4.,1				75							
27				- 4				76							
28				<del>'                                    </del>			1	77 78							
29								79							
30								80							
32								81							
33					<del> </del>	-	-	82 83							
34							ŀ	84							
35 36								85							
37								86		N					
38			-				-	87							
39							+	88 89							
40							İ	90							
42	-						[	91						-	
43			+				· }	92 93		- $T$					
44.							- t	93							
45 46								95							
47	<del></del>						[	96							
48							}-	97 98							
50	<u>_</u>						}-	99							
			-					100							
TOTAL DED	الحق	4		4		1	1	OTALIND		\$		4		苷	
TOTAL DEP	7, -	(2) (C)	5	<del>(</del> 2		<b>*</b>	ļ.	OTAL DEP		<del>(</del> a		⟨¤		<b>⟨</b> ==	
CIAMS	// 3	333	Y E	1555	{ <u>{</u>			TOTAL	اغ	3.55		288		STATE OF	